

Mono County
Community Development Department
Planning Division

P.O. Box 347
Mammoth Lakes, CA 93546
(760) 924-1800, fax 924-1801
commdev@mono.ca.gov

P.O. Box 8
Bridgeport, CA 93517
(760) 932-5420, fax 932-5431
www.monocounty.ca.gov

**APPEAL
APPLICATION**

Must be filed within
15 days of date of action
in order to be valid.

APPLICATION # _____	FEE \$ _____
DATE RECEIVED _____	RECEIVED BY _____
RECEIPT # _____ CHECK # _____ (NO CASH)	

APPELLANT _____

ADDRESS _____ CITY/STATE/ZIP _____

TELEPHONE (_____) _____ E-MAIL _____

APPLICATION # BEING APPEALED _____

DATE OF ACTION _____ **DATE OF APPEAL** _____

NATURE OF APPEAL: Describe what is being appealed. If it is a condition of approval, attach a copy of the project conditions and indicate which conditions are being appealed.

REASON FOR APPEAL: Describe why the decision is being appealed.

APPLICATION SHALL INCLUDE:

- A. Completed application form.
- B. Deposit for project processing: See Development Fee Schedule.

I CERTIFY UNDER PENALTY OF PERJURY THAT I am: q legal owner(s) of the subject property, q corporate officer(s) empowered to sign for the corporation or authorized legal agent, or q other interested party.

Signature

Signature

Date